

Building Inspection Department

100 North Court Street Georgetown, KY 40324

Phone: (502) 863-9802 Fax: (502) 863-4169

Commercial Building Application

Permit Application Form						
Permit Number						
☐ City [☐ County					

Construction Location							Zoning		
Architect/Engineer							Contact N	lumber	
Owner						Contact Na	me		
Address						Contact Numbers			
Contractor	Contractor						Contact Name		
Address						Contact Numbers			
Applicant is Owner Contractor Architect / Contractor									
Type of Work Proposed Use Group									
New Building ☐ Fit UP ☐ Assembly ☐ Industrial Renovate Existing Bldg. ☐ Addition ☐ Business ☐ Institutional ☐ Other (explain below) ☐ Repair ☐ Educational ☐ Mercantile ☐ Factory ☐ Storage Description									
Building: L		W		Н		Exterior of	Building		
Foundation									
roul	luation			Sauara	Footog	0		Other	Paguiramants
Type	Ma	terial	_	Square	Footage	e			Requirements
Type Basement	Ma	oncrete		# of Stories	Footage	e		ment plan	☐ YES ☐ NO
Type Basement Crawl	Ma 	oncreto lock		# of Stories Ft. per Floor	Footage	e Sq.Ft.	Work (ment plan	☐ YES ☐ NO ☐ YES ☐ NO
Type Basement Crawl Slab	Ma C B I O	oncreto lock CF	Sq.	# of Stories Ft. per Floor Basement?	Footag	Sq.Ft.	Work (ment plan	□ YES □ NO □ YES □ NO □ YES □ NO
Type Basement Crawl	Ma C B I O	oncreto lock	Sq.	# of Stories Ft. per Floor Basement? Other	Footag	Sq.Ft. Sq.Ft. Sq.Ft.	Work (ment plan	□ YES □ NO □ YES □ NO □ YES □ NO □ YES □ NO
Type Basement Crawl Slab	Ma C B I O	oncreto lock CF	Sq.	# of Stories Ft. per Floor Basement?	Footage	Sq.Ft.	Work (ment plan Comp Ins. n Control	□ YES □ NO □ YES □ NO □ YES □ NO
Type Basement Crawl Slab	Ma C B I O	oncreto lock CF	Sq.	# of Stories Ft. per Floor Basement? Other	Footage	Sq.Ft. Sq.Ft. Sq.Ft.	Work (ment plan Comp Ins. n Control	□ YES □ NO □ YES □ NO □ YES □ NO □ YES □ NO
Type Basement Crawl Slab	Ma C B I O	oncreto lock CF	Sq.	# of Stories Ft. per Floor Basement? Other	FEES	Sq.Ft. Sq.Ft. Sq.Ft.	Work (ment plan Comp Ins. n Control Approval	□ YES □ NO □ YES □ NO □ YES □ NO □ YES □ NO
Type Basement Crawl Slab	Ma	oncreto lock CF rt. Post	Sq.	# of Stories Ft. per Floor Basement? Other	FEES Cost F	Sq.Ft. Sq.Ft. Sq.Ft. Sq.Ft.	Work (Erosio State	ment plan Comp Ins. n Control Approval	☐ YES ☐ NO ☐ Not Required
Type Basement Crawl Slab Post	Ma	oncreto lock CF rt. Post	Sq.	# of Stories Ft. per Floor Basement? Other	FEES Cost F	Sq.Ft. Sq.Ft. Sq.Ft. Sq.Ft.	Work (Erosio State	ment plan Comp Ins. n Control Approval	☐ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO ☐ Not Required \$
Type Basement Crawl Slab Post Cost of Cons	Ma	oncreto lock CF rt. Post	Sq. T	# of Stories Ft. per Floor Basement? Other Otal Sq. Feet	Cost F Plan TO ner's age	Sq.Ft. Sq.Ft. Sq.Ft. Sq.Ft. Fee Schedule Review Fee FAL FEE nt of the prop	Work (Erosio State Per Chart X p erty and tha	ment plan Comp Ins. n Control Approval er Sq. Ft.	☐ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO ☐ Not Required \$
Type Basement Crawl Slab Post Cost of Cons The undersigned h the best of their kn	Ma	oncreto lock CF rt. Post	Sq. T	# of Stories Ft. per Floor Basement? Other Otal Sq. Feet	Cost F Plan TO ner's age	Sq.Ft. Sq.Ft. Sq.Ft. Sq.Ft. Fee Schedule Review Fee TAL FEE nt of the propDate:	Work (Erosio State Per Chart X p erty and tha	ment plan Comp Ins. n Control Approval er Sq. Ft.	YES NO YES NO YES NO YES NO Not Required \$ sation is true and accurate to
Type Basement Crawl Slab Post Cost of Cons The undersigned h the best of their kn	Ma	oncreto lock CF rt. Post	Sq. T	# of Stories Ft. per Floor Basement? Other Otal Sq. Feet	FEES Cost F Plan TO ner's age	Sq.Ft. Sq.Ft. Sq.Ft. Sq.Ft. Fee Schedule Review Fee TAL FEE nt of the propDate:	Work (Erosio State Per Chart X p erty and tha	ment plan Comp Ins. n Control Approval er Sq. Ft.	YES NO YES NO YES NO YES NO Not Required \$ sation is true and accurate to



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www.georgetownky.gov

AFFIDAVIT OF ASSURANCES* PURSUANT TO KRS 198B.060 (10)

the above re	60 (10), that all ceferenced project	shall be in compliance wit	tors employed or h the Commonwe	, and state that will be employed on an alth of Kentucky requiremer ment Insurance (according t	y activity under nts for Worker's			
	THIS the	day of		, 20				
				Contractor, Owner or Owner	r's Agent			
SUBSCRIBE	ED AND SWORN	to before me by						
Applicant, or	n this the	_day of		, 20				
				Notary Public State At Large				
My commiss	ion Expires:				· · · · · · · · · · · · · · · · · · ·			
UNUNUNUNUN UNUNUNUNUN	presented the	Affidavit of Assurances is not assurances upon issuance	e of the local build		vas uunnunnunnunnunnu uunnunnunnunnun			
		n – I am aware of and wil Prevention & Sediment		ity of Georgetown Ordina nents.	nce # 2010-			
	Energy Sticker –An Energy Conservation Certificate sticker will be attached to the electrical panel box with required information before the final building inspection.							
	-	Inspections – I am aware of the required inspections and the applicant's responsibility to schedule those inspections.						
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			Signature	of Applicant				